

<p style="text-align: center;"><b>UTILITY PATENT APPLICATION TRANSMITTAL</b></p> <p>(Only for new non-provisional applications under 37 CFR 153(b))</p>	<b>Attorney Docket Number:</b> TRNR010US0
	<b>First Named Inventor or Application Identifier:</b> Terry R. Turner
	<b>Title:</b> Transducer Package for Process Control
	<b>Express Mail Label No.:</b> EL 978212152 US
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

 17497 U.S. PTO  
 10/668398  
 09/23/03
**ACCOMPANYING APPLICATION PARTS**

- |   |  |
|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (submitted in duplicate)<br>2. <input checked="" type="checkbox"/> Applicant Claims Small Entity Status<br>3. <input checked="" type="checkbox"/> Specification: Total Pages: <u>28</u><br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113): Total Sheets: <u>12</u><br>5. ___ Oath or Declaration: Total pages: _____<br>a. ___ Newly executed (original or copy)<br>b. ___ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)<br>i. ___ <u>Deletion of Inventor(s)</u> . Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. ___ Application Data Sheet. 37 CFR 1.76<br>7. ___ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | 8. ___ Assignment papers (cover sheet & document(s))<br>9. ___ CFR 3.73(b) Statement (when there is an assignee)<br>___ Power of Attorney<br>10. ___ English Translation Document (if applicable)<br>11. ___ Information Disclosure Statement. (IDS)/PTO-1449.<br>___ Copies of IDS citations<br>12. ___ Preliminary Amendment<br>13. <input checked="" type="checkbox"/> Return Receipt Postcard. (MPEP 503) (should be specifically itemized.)<br>14. ___ Certified Copy of Priority Document(s) (if foreign priority is claimed.)<br>15. ___ Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Must attach form PTO/SB/35 or its equivalent.<br>16. ___ Credit Card Authorization for Payment |
|---|--|

17. **If a Continuing Application:** (check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

\_\_\_ Continuation \_\_\_ Divisional \_\_\_ Continuation-in-part of prior application No. \_\_\_\_\_  
 Prior application Information: Examiner \_\_\_\_\_ Group/Art Unit \_\_\_\_\_

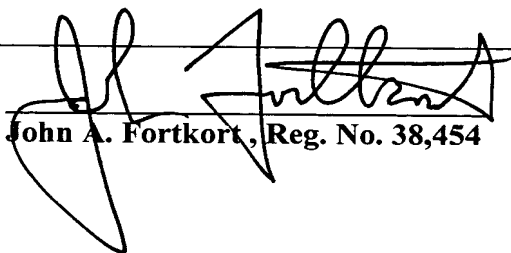
For Continuation or Divisional only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

Correspondence Address:

37,141 Customer Number or Bar Code Label:

Correspondence Address:

 John A. Fortkort  
 Hulsey, Calkins, Fortkort & Webster, LLP  
 8911 N. Capital of Texas Hwy., Suite 3200  
 Austin, Texas 78759  
 Telephone: 512/795-0095 Facsimile: 512/795-9905

  
 John A. Fortkort, Reg. No. 38,454

 Date 9-23-03

02570 U.S. PTO  
09/23/03

<b><u>FEE TRANSMITTAL</u></b> (Submit in Duplicate)	Application Title:	Transducer Package for Process Control
	First Named Inventor:	Terry R. Turner
	Attorney Docket No:	TRNR010US0

**METHOD OF PAYMENT**

1. *Deposit Account Authorization*

- a. XXX The Commissioner is hereby authorized to charge the filing fee and any deficiencies and credit any overpayments to:
- i. Deposit Account Number: 50-2726
  - ii. Deposit Account Name: Hulsey & Calkins, LLP
- b. XXX The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17.
- c. XXX Applicant Claims Small Entity Status.

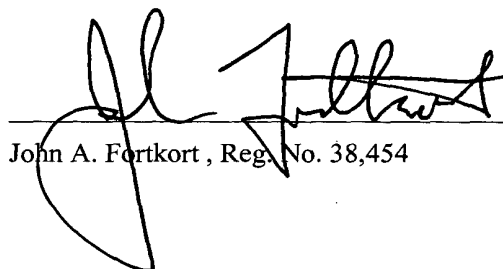
2. *Payment Enclosed*

- a. XXX Check
- b. ☐ Credit Card
- c. ☐ Money Order
- d. ☐ Other

**FEE CALCULATION**

Filing Fee Calculation					
Entity	Basic Filing Fee	Each Independent Claim in Excess of 3	Each Claim in Excess of 20	Multiple Dependent Claim Fee	Total
Small	\$375	10 x \$ 42 = 420	32 x \$9 = 288	0 x \$140 = 0.00	\$1,083
Other	\$750	_____ x \$84 = _____	_____ x \$18 = _____	_____ x \$280 = _____	

XXX Total Filing Fee: \$1,083 \_\_\_\_\_  
 \_\_\_\_\_ Assignment Recording Fee \$ \_\_\_\_\_  
 \_\_\_\_\_ Other Fee Payment \$ \_\_\_\_\_

  
 John A. Fortkort, Reg. No. 38,454